

Membership Application
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CORPORATE MEMBERS

COMPANY NAME: _____

WEB SITE: _____

CORPORATE MEMBER REPRESENTATIVES

Please designate two individuals

	FIRST REPRESENTATIVE	SECOND REPRESENTATIVE
TITLE		
LAST NAME		
FIRST NAME		
ADDRESS		
TOWN		
COUNTY		
POSTCODE		
TEL:		
FAX:		
EMAIL:		
DATE OF BIRTH:		

PROPOSED BY: (FCSI Professional Member)	
SECONDED BY: (FCSI Professional Member)	

BUSINESS ACTIVITIES

PRINCIPAL BUSINESS ACTIVITY	UK MANUFACTURER IMPORTER DISTRIBUTOR KITCHEN CONTRACTOR CONTRACT CATERER OTHER (PLEASE STATE)
DESCRIPTION OF BUSINESS ACTIVITIES	
PLEASE PROVIDE SPECIFIC EXAMPLES OF PROJECTS FULFILLED WITH FCSI PROFESSIONAL MEMBERS	

PROFESSIONAL CONDUCT

HAVE YOU OR ANY OF THE OTHER DIRECTORS OR PARTNERS OF THE COMPANY BEEN BARRED FROM BEING A DIRECTOR OR PARTNER OF A COMPANY OR BEEN CONVICTED OF A CRIMINAL OFFENCE?	YES/NO
DOES YOUR BUSINESS OFFER CONSULTANCY SERVICES TO CLIENTS?	YES/NO
IF YOUR ANSWER IS 'YES' TO EITHER OF THE ABOVE QUESTIONS, PLEASE ATTACH FULL DETAILS INCLUDING THE DATE OF ANY OF THE EVENTS REFERRED TO.	

INSURANCES

TYPE	AVAILABLE	LIMITATION
EMPLOYER'S LIABILITY	YES/NO/N/A FOR BUSINESS	£
PUBLIC LIABILITY	YES/NO/N/A FOR BUSINESS	£
CONTRACT ALL RISKS	YES/NO/N/A FOR BUSINESS	£
PROF. INDEMNITY	YES/NO/N/A FOR BUSINESS	£
PRODUCT LIABILITY	YES/NO/N/A FOR BUSINESS	£
OTHER (PLEASE STATE)	YES/NO/N/A FOR BUSINESS	£

LISTING OF PRODUCTS

- Coffee Machines
- Cooking Equipment
- Counter Manufacturers
- Dishwashing/Glasswashing Equipment
- Information Technology
- Interior Design
- Laundry Equipment
- Light Equipment
- Meal Distribution Systems including Trolleys
- Refrigerators, Freezers and Ice Machines
- Service Ware
- Software
- Stainless Steel Equipment
- Vending
- Ventilation
- Other (please specify)

ACKNOWLEDGEMENT

I confirm that all information given to the FCSI is complete and correct. I agree to provide additional information, if requested by FCSI. I shall conduct my activities in accordance with FCSI's Objectives and FCSI's Code of Ethics. I further waive and release all claims, demands and actions that I now or in the future may have against FCSI, its officers, directors, members and employees for any act or omission in granting or denying membership in FCSI.

I hereby acknowledge that I qualify, to the best of my knowledge, for the membership category for which I am applying, as defined by the FCSI by-laws Article IV, Sections A & B.

Date:

Signature:

CURRENT DUES

After acceptance, all new members are billed for their first year subscriptions. The year runs from January to December and new members are billed pro rata.

ANNUAL FEES - £1000 + VAT (TO BE INVOICED UPON ACCEPTANCE BY FCSI)

CATERING CONTRACTORS

(PLEASE TICK YOUR APPROPRIATE NO. OF CONTRACTS)

Up to 20 (£200 + VAT)

21–99 (£500 + VAT)

100 – 499 (£1000 + VAT)

Over 500 (£1500 + VAT)

ALL OTHER CATEGORIES

(PLEASE TICK YOUR APPROPRIATE TURNOVER BAND)

Up to £2m (£200 + VAT)

£2m to £5m (£500 + VAT)

£5m to £10m (£1000 + VAT)

Over £10m (£1500 + VAT)